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Bib Data Sheet

CONFIRMATION NO. 6507

<b>SERIAL NUMBER</b> 09/616,472	<b>FILING DATE</b> 07/14/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3276 3626	<b>ATTORNEY DOCKET NO.</b> AD-1
<b>APPLICANTS</b> Whitney Durand, Signal Mountain, TN; <b>** CONTINUING DATA *****</b> <i>yes</i> <b>V.F</b> THIS APPLN CLAIMS BENEFIT OF 60/143,960 07/15/1999 <b>** FOREIGN APPLICATIONS *****</b> <i>none</i> <b>V.F</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 08/20/2000</b> <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>V.F</i> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 174
			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 1473				
<b>TITLE</b> System, apparatus, and methods for developing and delivering health information				
<b>FILING FEE RECEIVED</b> 1806	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	